

PTO/SB/82 (01-08)

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AND  
CHANGE OF CORRESPONDENCE ADDRESS**

Application Number	10/017,074
Filing Date	December 7, 2001
First Named Inventor	Chang
Art Unit	
Examiner Name	
Attorney Docket Number	Product Engine - 008

I hereby revoke all previous powers of attorney given in the above-identified application.

☐ A Power of Attorney is submitted herewith.

OR

☒ I hereby appoint the practitioners associated with the Customer Number:

50086

☒ Please change the correspondence address for the above-identified application to:

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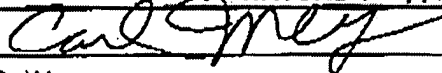
<input type="checkbox"/> Firm or Individual Name				
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City		State		Zip
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I am the:

☐ Applicant/Inventor.

☒ Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

**SIGNATURE of Applicant or Assignee of Record**

Signature			
Name	Carl Meyer		
Date	April 17, 2008	Telephone	408-867-5040

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

☒ \*Total of \_\_\_\_\_ forms are submitted.

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